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02-16-05 PATENT APPLICATION 09/870,711 2

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Michael I. Catherwood

Serial No.:

09/870,711

Filing Date:

June 1, 2001

Group Art Unit:

2124

Examiner:

David H. Malzahn

Title:

Maximally Negative Signed Fractional Number

Multiplication

Mail Stop Issue Fee Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450 I hereby certify that this Information
Disclosure Statement is being
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Patents, Alexandria, VA 223131450, on the date shown below.

Adesewa Faleti

2/15/05

Date

Dear Sir:

## INFORMATION DISCLOSURE STATEMENT

Applicant respectfully requests, pursuant to 37 C.F.R. §§1.56, 1.97 and 1.98, that the references listed on the attached PTO-1449 form be considered and cited in the examination of the above-identified application. Copies of the references are enclosed for the Examiner's convenience. Furthermore, pursuant to 37 C.F.R. §§1.97 (g) and (h), no representation is made that these references are material to the patentability of the present application.

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180.00 OP

Applicant encloses a check in the amount of \$180.00, however, the Commissioner is hereby authorized to charge any additional fees or credit any overpayments to Deposit Account No. 50-2148 of Baker Botts L.L.P.

Respectfully submitted,

BAKER BOTTS\_L.L.P.

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Date: February 15, 2005

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|  |                                       |   | 2   | Application No.                                   | Aı          | oplicant(s)     |                       | Pa          | age 1 of 1  |  |
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| Information Risclosure Station in an Application |                                       |   | 00/0/0,/ 1  |   | Group Art   | Unit Filing I   | Filing Date           |             |             |  |
|  |                                       |   |   |   | 2124        | June 1, 2001    |                       |             |             |  |
|  |                                       |   |   | U.S. PATENT DOCUMENT                              | s           |                 |                       |             |             |  |
|  |                                       | DOCUMENT NO.  | DATE  | NAME  | C           | LASS            | SUBCLASS              | FILIN       | FILING DATE |  |
|  | A.                                    |   |   |   |             |                 |                       |             |             |  |
|  | В.                                    |   |   |   |             |                 |                       |             |             |  |
|  | C.                                    |   |   |   |             |                 |                       |             |             |  |
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|  | P.                                    |   |   |   |             |                 |                       | _           |             |  |
|  | Q.                                    |   |   |   |             |                 |                       |             |             |  |
|  | R.                                    |   |   |   |             |                 |                       |             |             |  |
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|  | Т.                                    |   |   |   |             |                 | <u> </u>              |             | 1           |  |
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|  | W.                                    |   |   |   |             |                 |                       |             |             |  |
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